

**REPORT OF SPECIAL FUELS
RECEIVED FROM LICENSED KENTUCKY DEALERS**

Tax Paid by Consignee

Name and Address of Dealer		Report for Month of _____, 20____			INSTRUCTIONS: This report must be completed by all licensed special fuels dealers who have received special fuels from other licensed Kentucky special fuels dealers. Use a separate line for each shipment. Attach this report to Form 72A138.			
Name and Address of Consignor <i>(List vendor on succeeding line if different from consignor)</i>	Carrier	Truck No. Car Initial and No.	Origin	Destination	Invoice Number	Date of Shipment	Date of Receipt	Gallons Received
TOTAL*								

**Total receipts from Kentucky dealers must equal line 1, Form 72A138.*